

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1996

Application or Docket Number

08/849543

CLAIMS AS FILED - PART I

		(Column 1)	(Column 2)	NUMBER EXTRA
FOR		NUMBER FILED		
BASIC FEE				
TOTAL CLAIMS		22	minus 20 =	*
INDEPENDENT CLAIMS			minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT				

SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
RATE		Fee
		385.00
x\$11=		22
x40=		
+130=		
TOTAL		590
RATE		Fee
		770.00
x\$22=		
x80=		
+260=		
TOTAL		

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A			(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
Total	*	Minus	**	=	
Independent	*	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
RATE		ADDITIONAL FEE
x\$11=		
x40=		
+130=		
TOTAL ADDIT. FEE		
RATE		ADDITIONAL FEE
x\$22=		
x80=		
+260=		
TOTAL ADDIT. FEE		

AMENDMENT B			(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
Total	*	22	Minus	** 22	= —
Independent	*	1	Minus	*** 3	= —
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
RATE		ADDITIONAL FEE
x\$11=		
x40=		
+130=		
TOTAL ADDIT. FEE		
RATE		ADDITIONAL FEE
x\$22=		
x80=		
+260=		
TOTAL ADDIT. FEE		

AMENDMENT C			(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
Total	*	21	Minus	** 22	= —
Independent	*	2	Minus	*** 3	= —
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
RATE		ADDITIONAL FEE
x\$11=		
x40=		
+130=		
TOTAL ADDIT. FEE		
RATE		ADDITIONAL FEE
x\$22=		
x80=		
+260=		
TOTAL ADDIT. FEE		

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request:	2 Serial/Patent #	08/18/1957/3		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing		961	10/5/1977	\$455
<input type="checkbox"/> Amendment				\$
<input type="checkbox"/> Extension of Time				\$
<input type="checkbox"/> Notice of Appeal/Appeal				\$
<input type="checkbox"/> Petition				\$
<input type="checkbox"/> Issue				\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.				\$
<input type="checkbox"/> Maintenance				\$
<input type="checkbox"/> Assignment				\$
<input type="checkbox"/> Other				\$
		7 TOTAL AMOUNT OF REFUND	\$ 455	
8 TO BE REFUNDED BY:				
<input type="checkbox"/> Overpayment		<input checked="" type="checkbox"/> Treasury Check		
<input checked="" type="checkbox"/> Duplicate Payment		<input checked="" type="checkbox"/> Credit Deposit A/C #:	9, 116-0235	
9. No Fee Due (Explanation):  SMALL Entity NO FEE & FEE CANCELL				
10 REASON:				
11 REFUND REQUESTED BY: <u>V. Wallace</u>				
TYPED/PRINTED NAME:		TITLE: <u>Patent Agent</u>		
SIGNATURE: <u>V. Wallace</u>		PHONE: <u>305-23736</u>		
OFFICE: *****				
THIS SPACE RESERVED FOR FINANCE USE ONLY:				
APPROVED: _____		DATE: _____		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B